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SUBJECT: BANGLADESH HEALTH MINISTER ENDORSES USG
SUPPORTED FAMILY PLANNING AND SAFE MOTHERHOOD PROGRAM

REF: Dhaka 000698

SUMMARY

1. On July 23, 2009, Ambassador Moriarty and Bangladesh Minister for Health and Family Welfare, Dr. A.F.M. Ruhul Haque, launched the Mayer Hashi Family Planning and Safe Motherhood Project was launched in Dhaka the start of a new era of USG assistance to the Government of Bangladesh (GOB) in family planning and safe motherhood. The Mayer Hashi Project - which means smiling mother in Bangla - is a four year 12 million USD project. The objective of Mayer Hashi is to reestablish the importance of long acting and permanent methods (LAPMs) of clinical contraceptives. Mayer Hashi will train government, NGO and private sector providers to give LAPMs, resulting in 5 million couples receiving LAPMs by the end of the project. The Mayer Hashi program will also promote maternal health by providing interventions to prevent post-partum hemorrhage and eclampsia (high blood pressure and seizures during pregnancy).

RESTARTING BANGLADESH'S FAMILY PLANNING PROGRAM

2. USG has been the largest single donor for family planning in Bangladesh for decades. Over the last thirty years, USAID's technical assistance, training, commodity support, advocacy and strategic interventions have helped Bangladesh achieve remarkable progress. Fertility has been reduced by half from 6.3 children per woman in 1971 to 2.7 as reported in the most recent Bangladesh Demographic and Health Survey (2007). Similarly contraceptive use among couples has increased from 8% to 58% over the past 30 years. The USAID-funded Social Marketing Company contributes over 34% of contraceptives and makes commodities available through a network of over 200,000 pharmacy outlets. In Bangladesh most women rely on temporary method such as pills, injectables and condoms. However the fact that nearly 62% of women want to space or delay subsequent pregnancies, only 7% are using LAPMs. LAPMs use has reviewed stagnant for over a decade

MINISTRY OF HEALTH'S RESPONSE

3. Minister Haque admitted that the government had not been attentive over the past several years in addressing the lackluster performance of its family planning program. The Minister urged USG, other donors and NGOs to work together to help GOB reverse this troubling trend. The Minister again echoed the previous call to action for all levels of government to mobilize to address Bangladesh's population problem and remarked that "every minister is a Health Minister" because population affects all of the development sectors. Historically, the bifurcation of the ministry with vertical structures for implementing health and family planning programs has been a continuing obstacle for the sector. However, both senior officials - the Director General of Family Planning, Mr. Qayyum and Director General of Health Services, Prof. Hossain - gave impressive remarks regarding the need to work together on population and health issues. Currently family planning and health services

are implemented vertically from the central level down to the district level. Prof. Hossain came out strongly and indicated that the "population is imbalanced by the growing numbers of illiterates who are having more children than the literate population" whose numbers cannot be sustained. He pledged that he and his Directorate would work hand in hand with his counterpart in family planning to resuscitate family planning through one health system, for which he was applauded.

AMBASSADOR'S RESPONSE

14. Ambassador Moriarty reiterated the USG's long standing support to the health sector contributing over 700 million USD since 1971, and he confirmed continued support to Bangladesh's health sector. Ambassador Moriarty compared Bangladesh, with a population of 150 million, to the state of Iowa. Iowa has a similar size land mass as Bangladesh but only 5 million people - making Bangladesh 30 times more populous than that tiny state. The Ambassador highlighted that the Obama Administration's Global Health Initiative will focus on maternal and child health and could support Bangladesh's efforts to improve the health of women and children.

USAID MISSION DIRECTOR'S RESPONSE

15. Ms. Denise Rollins, USAID Mission Director, congratulated the Minister and his staff on their commitment in addressing family planning and protecting women's health. Specifically, Ms. Rollins congratulated the GOB in reinstating Safe Motherhood Day, gathering technical experts, medical providers and academia on June 17, 2009 to develop a National Action Plan for Maternal and Neonatal Health,

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and the current redrafting of the 2004 Population Policy. Ms. Rollins informed the audience that in the last six months this government has followed words with actions on its intent to restart its family planning program and increase chances of meeting the Millennium Development Goals for improving maternal health and lowering fertility below two children per woman. Ms. Rollins reminded participants of continued USAID support of the national health program and announced that over 40 million USD is being programmed for health activities in Bangladesh in 2009. She highlighted that this year USAID will increase support to family planning and population programs, and will increase its focus on nutrition, food security and water and sanitation. Ms. Rollins ended by thanking the Minister for accepting the invitation to join the Ambassador in Sylhet (Northwestern Bangladesh) to see USAID activities, including the launch of the 320th clinic in the USAID-funded Smiling Sun Franchise.

THE MAYER HASHI PROGRAM

16. The Mayer Hashi Program will make long acting more available to couples who voluntarily chose to space pregnancies or limit births. Mayer Hashi, which means smiling mother in Bangla, conjures up the images of a smiling mother who knows that she is free from unwanted pregnancies and its risks; leading to a happy, healthy family. The project will address high rates of maternal mortality due to preventable causes, including high risk pregnancies and complications. Mayer Hashi will train clinical service providers to increase their skills in clinical contraceptive methods such as inter-uterine devices, implants, vasectomies and tubal ligations. The 12 million USD four-year project will provide services in 21 of 64 districts and target low performing areas such as Sylhet, Chittagong and parts of the Barisal division. Mayer Hashi will work with local officials, religious leaders, especially men, to mobilize awareness and support for increasing availability and use of LAPMs. Currently, LAPM is the least preferred method of contraception and makes up only 7% of the method mix. By the end of the project, it is envisioned that 5 million couples will use LAPMs. Mayer Hashi will also target maternal health, by preventing maternal deaths. The two leading causes of maternal death in Bangladesh are post-partum hemorrhage and eclampsia at the community and facility level. Mayer Hashi will provide training to service providers on

the Active Management of the Third Stage of Labor (AMSTL). The program will also support the assessment and trial of Misoprostol (a drug) to prevent post-partum hemorrhage.

LAUNCHING EVENT

17. Over 100 people attended the launching event for the Mayer Hashi program, including senior government officials, USG, donors, NGOs, civil society organizations. and the event also received extensive coverage from major media sources. Following local tradition the ceremony was laced with a series of cultural performances, including a dance with song and lyrics related to family planning. The event ended with a skit conveying messages that promote LAPM and address problems of early marriage, which can put women at risk for early pregnancy and related complications.

COMMENT

18. The Health Minister strongly supports the new USG supported program to promote maternal health and safe motherhood. The launching event of the Mayer Hashi Program was a turning point for both GOB and USG in recognizing the opportunities that exist for revamping Bangladesh's family program through the promotion of LAPMs. Opportunities also exist to elevate population issues with senior government officials, and USG will identify every possible opportunity to raise awareness on the impact of population which stands to slow Bangladesh's economic growth, over burden the environment, and threaten the long term prospects for political stability and democracy.

MORIARTY